

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>04/05/04</u>		2 Serial/Patent # <u>10/657,770</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal			\$
<input checked="" type="checkbox"/>	Petition		<u>02/05/04</u>	\$ <u>130</u>
<input checked="" type="checkbox"/>	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
		7 TOTAL AMOUNT OF REFUND		\$ <u>130</u>
		8 TO BE REFUNDED BY:		
		<input checked="" type="checkbox"/>	Treasury Check	
		<input type="checkbox"/>	Credit Deposit A/C #:	
		9	<div style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; position: relative;"> <span style="position: absolute; left: 50%; top: 50%; transform: translate(-50%, -50%); font-weight: bold;">--</span> </div>	
10 REASON:		<input checked="" type="checkbox"/> No Fee Due (Explanation): <u>Postcard proves allegedly mislabeled drugs were present on day 1. Refund pet fee</u>		
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>E. Shirene Willis</u>		TITLE: <u>Pet Attny</u>		
SIGNATURE: <u>E. Shirene Willis</u>		PHONE: <u>308-6712</u>		
OFFICE: <u>Office of Petition</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: <u>Olivia Kelly</u>		DATE: <u>4-8-04</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance  
Refund Branch  
Crystal Park One, Room 802B**